

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines

12FE4M5

**Michigan Doctors Political Action Committee - Michigan State Medical
Society**

ADDRESS (number and street)

P.O. Box 769☐(Check if address
is changed)**East Lansing****MI****48826**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

igass@msms.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.mdpac.org

COMMITTEE'S FAX NUMBER

5173372490

2. DATE

12**06****2006**

3. FEC IDENTIFICATION NUMBER

C C00001180

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

GOLDBERG, SCOT

Signature of Treasurer

Electronically Filed by **GOLDBERG, SCOT**

Date

12**06****2006**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

Write or Type Committee Name

Michigan Doctors Political Action Committee - Michigan State Medical Society

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name

of Treasurer

Scot F. Goldberg, MD

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Secretary/Treasurer

Telephone number

517**336****5752**Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Capitol National Bank

Mailing Address

200 Washington Square North

P.O. Box 26068

Lansing

MI

48901

2577

CITY ▲

STATE ▲

ZIP CODE ▲